

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME CYPRUS THOMPSON CREEK MINING CO  
ADDRESS P.O. BOX 62  
CLAYTON ID 83227

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16) ID0025402 PERMIT NUMBER  
(17-19) 001 B DISCHARGE NUMBER

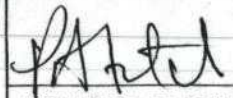
F - FINAL  
001--QUARTERLY MONITORING  
JUL 16 1987  
Approval expires 9-30-85

FACILITY  
LOCATION BERT DOUGHTY  
ATTN: ~~XXXXXXXXXXXX~~ ENVIRON SUPERV

MONITORING PERIOD  
FROM YEAR 87 MO 04 DAY 01 TO YEAR 87 MO 06 DAY 30  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

WATER COMPLIANCE SECTION  
MAJOR (SUBR OBPA - REGION 10)  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ARSENIC, TOTAL (AS AS) 01002 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	-	*****		-		
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY GRAB	
CADMIUM, TOTAL (AS CD) 01027 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	-	*****		-		
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY GRAB	
COPPER, TOTAL (AS CU) 01042 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	-	*****		-		
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY GRAB	
ZINC, TOTAL (AS ZN) 01092 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	-	*****		-		
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY GRAB	
	SAMPLE MEASUREMENT				NO FLOW						
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
C. G. JAMES TYPED OR PRINTED			208 AREA CODE	838-2201 NUMBER	87 YEAR	7 MO

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

USE THIS DMR FOR REPORTING PARAMETERS AT 002 SAMPLED ON A QUARTERLY BASIS.



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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

100025402

002 B

PERMIT NUMBER

DISCHARGE NUMBER

F - FINAL

002--QUARTERLY MONITORING

JUL 16 1987

Form Approved  
OMB No. 2040-0006  
Approval Expires 9/30/87

FACILITY

LOCATION BERT DOUGHEY  
ATTN: XXXXXXXXXXXX, ENVIRON SUPERV

MONITORING PERIOD

FROM YEAR 87 MO 04 DAY 01 TO YEAR 87 MO 06 DAY 30  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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MAJOR (SUBR 03) EPA-REGION 10

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ARSENIC, TOTAL (AS AS)	SAMPLE MEASUREMENT	*****	*****		*****	<0.005	*****		0	Qtrly	GRAB
01002 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY	GRAB
CADMIUM, TOTAL (AS CD)	SAMPLE MEASUREMENT	*****	*****		*****	<0.005	*****		0	Qtrly	GRAB
01027 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****		*****	0.022	*****		0	Qtrly	GRAB
01042 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY	GRAB
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	*****	*****		*****	0.039	*****		0	Qtrly	GRAB
01092 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT AVERAGE	*****	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

C. G. JAMES

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

208  
AREA CODE

838-2200  
NUMBER

87  
YEAR

7  
MO

13  
DAY

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